(Rev. 04/18) Case 6:20-po-00-42-13-15-16-16-16-16-16-16-16-16-16-16-16-16-16-						PEOR COURTUSE ONLY DUE DATE:		
PLEASE Read Instruction Page (attached): 1.YOUR NAME 2. EMAIL					3. PHONE NUMBER	4. DATE		
			2 . Divin 11 D		3.THONE HOMBER	51112		
5. MAILING ADDRESS					6. CITY	7. STATE	8. ZIP CODE	
9. CASE NUMBER 10. JUDGE						PROCEEDINGS		
13. CASE NAME					11. FROM 12. TO LOCATION OF PROCEEDINGS			
13. CASE NAME					14. CITY	15. STATE		
16. ORDER FOR P APPEAL No. CRIMINAL					CRIMINAL JUSTICE ACT BANKRUPTCY			
NON-APPEAL			CIVIL		IN FORMA PAUPERIS	OTHER (OTHER (Specify)	
17. TRANSCRIF	PT REQUESTED (Sp	ecify por	tion(s) and date	e(s) of proceeding(s) f	for which transcript is requested) You mu			
TRIAL		DATE(S)		REPORTER	HEARINGS	DATE(S) REPORTER		
ENTIRE TRIAL					OTHER (Specify Below)			
JURY SELECTION								
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				18	S. ORDER (Grey Area for	or Court Reporter U	se)	
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CERTIFICATION (19 & 20) By signing below, I certify I will pay all charges (deposit plus additional).					ESTIMATE TOTAL			
19. SIGNATURE					PROCESSED BY			
20. DATE					PHONE NUMBER			
TRANSCRIPT TO BE PREPARED BY					COURT ADDRESS			
			DATE	ny				
ORDER RECEIVED BY								
DEPOSIT PAID			DEPOSIT PAID					
TRANSCRIPT ORDERED					TOTAL CHARGES			
TRANSCRIPT RECEIVED			LESS DEPOSIT					
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED					
PARTY RECEIVED TRANSCRIPT				TOTAL DUE				